

Embassy Small Grants Program Budget Narrative

1. Personnel (Description: An employee of the organization whose work is tied to the proposed project)

Position	Name of Employee	Annual Salary/ Rate	% of Work Time for Project	Amount Requested from U.S. Embassy <i>(Salary x Work Time)</i>	Cost-Share <i>(Salary x Work Time)</i>	Total <i>(Amount Requested + Cost Share)</i>
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
1. Personnel Sub-Total				\$0	\$0	\$0

Narrative Justification:

Source of Cost Share Funds (if apply):

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2. Fringe Benefits (Description: May include contributions for social security, employee insurance, pension plans, etc.)					
Component	Wage	Rate	Amount Requested from MEPI (Wage x Rate)	Cost-Share (Wage x Rate)	Total (Amount Requested + Cost Share)
					\$0
					\$0
					\$0
					\$0
					\$0
2. Fringe Benefits Sub-Total			\$0	\$0	\$0
<p><i>Narrative Justification:</i></p>					
<p>Source of Cost Share Funds (if apply):</p>					

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3. Travel (Description: Explain need for all travel. Must follow U.S. Government regulations. The lowest available commercial fares for coach or equivalent accommodations must be used. Local travel policies prevail.)

Purpose of Travel	Item Description	Number of Days	Cost Per Unit/Rate	Number of People	Amount Requested from MEPI (No. of Days x Cost Per Unit x No. of People)	Cost-Share (No. of Days x Cost Per Unit x No. of People)	Total (Amount Requested + Cost Share)
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
							\$0
3. Travel Sub-Total					\$0	\$0	\$0

Narrative Justification:

Source of Cost Share Funds (if apply):

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4. Equipment: Not Allowable

5. Supplies (Description: Materials costing less than \$5,000 per unit and often having one-time use.)

Item Description	Unit of Measure	Cost Per Unit	Number of Units	Amount Requested from U.S. Embassy (Cost Per Unit x No. of Units)	Cost-Share (Cost Per Unit x No. of Units)	Total (Amount Requested + Cost Share)
						\$0
						\$0
						\$0
						\$0
						\$0
5. Supplies Sub-Total				\$0	\$0	\$0

Narrative Justification:

Source of Cost Share Funds (if apply):

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6. Contractual *(Description: The costs of project activities to be undertaken by a third-party contractor should be included in this category as a single line item charge. A complete itemization of the cost should be attached to the budget. If there is more than one contractor, each must be budgeted separately and must have an attached itemization.)*

Name/Item Description	Unit of Measure	Unit Cost	Number of Units	Amount Requested from U.S. Embassy (Cost Per Unit x No. of Units)	Cost-Share (Cost Per Unit x No. of Units)	Total (Amount Requested + Cost Share)
						\$0
						\$0
						\$0
						\$0
						\$0
6. Contractual Sub-Total				\$0	\$0	\$0

Narrative Justification:

Source of Cost Share Funds (if apply):

7. Construction: Not Allowable

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8. Other Direct Costs <i>(Description: Expenses not covered in any of the previous budget categories.)</i>						
Item Description	Unit of Measure	Cost Per Unit	Number of Units	Amount Requested from U.S. Embassy <i>(Cost Per Unit x No. of Units)</i>	Cost-Share <i>(Cost Per Unit x No. of Units)</i>	Total <i>(Amount Requested + Cost Share)</i>
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
						\$0
8. Other Direct Costs Sub-Total				\$0	\$0	\$0
Narrative Justification:						
Source of Cost Share Funds (if apply):						

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9. Total Direct Costs	
Amount Requested from MEPI <i>(Sum of Sub-total Costs from #1-#8 above)</i>	\$0
Cost-Share <i>(Sum of Sub-total Costs from #1-#8 above)</i>	\$0

10. Indirect Costs: Not Applicable	
Amount Requested from MEPI	\$0
Cost-Share	\$0

11. Total Costs (Sum of the Total Direct and Indirect Costs)	
Amount Requested from MEPI <i>(Sum of #9-10 above)</i>	\$0
Cost-Share <i>(Sum of #9-10 above)</i>	\$0

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BUDGET SUMMARY

Budget Categories	Federal Request (Cost)	Non-Federal Match or Cost Share	Total
1. Personnel	\$0	\$0	\$0
2. Fringe Benefits	\$0	\$0	\$0
3. Travel	\$0	\$0	\$0
4. Equipment	\$0	\$0	\$0
5. Supplies	\$0	\$0	\$0
6. Contractual	\$0	\$0	\$0
7. Construction	\$0	\$0	\$0
8. Other Direct Costs	\$0	\$0	\$0
9. Total Direct Costs (lines 1-8)	\$0	\$0	\$0
10. Indirect Costs	\$0	\$0	\$0
11. Total Costs (lines 9-10)	\$0	\$0	\$0